

Congress of the United States
House of Representatives
Washington, DC 20515

November 17, 2009

The Honorable Janet Napolitano
Secretary of Homeland Security
Department of Homeland Security
2801 Nebraska Avenue, NW
Washington, DC 20528

The Honorable Kathleen Sebelius
Secretary of Health and Human Services
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

The Honorable Tom Vilsack
Secretary of Agriculture
Department of Agriculture
1400 Independence Avenue, SW
Washington, DC 20250

Dear Secretary Napolitano, Secretary Sebelius, and Secretary Vilsack:

The American people expect the federal government to live up to its promise to take appropriate actions when a health crisis threatens their families and communities. Unfortunately, the government's words on H1N1 influenza and pandemic preparedness have failed to correspond to its actions. This pandemic serves as a powerful reminder that the federal government needs to regain the trust of the American public when it comes to preparedness and response to public health crises.

I have been extremely concerned with the H1N1 vaccine distribution process. It has come to my attention that both terrorists at Guantanamo Bay and Wall Street bankers were slated for access to the vaccine ahead of expectant mothers, children and others vulnerable to the H1N1 virus. Since October, 43 million vaccines have been made available, but this falls alarmingly short of the 159 million people considered to be at high risk of complications from H1N1. It also falls short of the government's original projection that 120 million vaccines would be available by mid-October. Just last week, it was estimated that eight million vaccines were going to be shipped, yet only five million were released. In Missouri alone, there have been too many deaths and more than 60 school closings since the beginning of the school year. Last year during this same period, there had been no school closings at all.

As we work to mitigate the spread of this virus today, we also need to look ahead to what actions can be taken, so the country is more prepared in the future. Over the past three years, the U.S. Government Accountability Office (GAO) has conducted a body of work, consisting of 12 reports and four testimonies, to help the nation better prepare for a pandemic. While federal agencies have taken action on 13 of GAO's 24 recommendations, 11 of the recommendations have not yet been fully executed. Please find a list of the unimplemented recommendations

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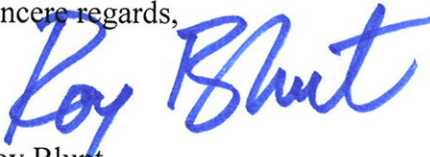
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attached to this letter. As you will see, each of your agencies has specific recommendations upon which they have not acted.

I believe that we need to implement these policies to improve our preparedness and ensure the safety of our citizens. I would like to know what the target implementation date is for each of the remaining recommendations. Are there any current barriers that are preventing these recommendations from being put into effect? If so, are there legislative actions that your agencies require to ensure these recommendations may be implemented as quickly as possible?

The American people are watching closely to ensure the federal government is performing those health care tasks for which it is already responsible. Thank you for your attention to this important matter.

Sincere regards,

A handwritten signature in blue ink, reading "Roy Blunt". The signature is stylized with a large, sweeping "R" and a cursive "Blunt".

Roy Blunt
Member of Congress

Open Recommendations from GAO's Work on an Influenza Pandemic¹

1. The Homeland Security Council should request that the Secretary of Homeland Security monitor and report to the Executive Office of the President on the readiness of agencies to continue their operations while protecting their employees in the event of influenza pandemic.
2. The Secretary of Health and Human Services should expeditiously finalize guidance to assist state and local jurisdictions to determine how to effectively use limited supplies of antivirals and pre-pandemic vaccine in a pandemic, including prioritizing target groups for pre-pandemic vaccine.
3. The Secretaries of Health and Human Services and Homeland Security should, in coordination with other federal agencies, convene additional meetings of the states in the five federal influenza pandemic regions to help them address identified gaps in their planning.
4. The Secretary of Homeland Security should work with sector-specific agencies and lead efforts to encourage the government and private sector members of the councils to consider and help address the challenges that will require coordination between the federal and private sectors involved with critical infrastructure and within the various sectors, in advance of, as well as during, a pandemic.
5. The Secretaries of Homeland Security and Health and Human Services should work together to develop and conduct rigorous testing, training, and exercises for an influenza pandemic to ensure that the federal leadership roles are clearly defined and understood and that leaders are able to effectively execute shared responsibilities to address emerging challenges. Once the leadership roles have been clarified through testing, training, and exercising, the Secretaries of Homeland Security and Health and Human Services should ensure that these roles are clearly understood by state, local, and tribal governments; the private and nonprofit sectors; and the international community.
6. The Homeland Security Council should establish a specific process and time frame for updating the National Pandemic Implementation Plan. The process should involve key nonfederal stakeholders and incorporate lessons learned from exercises and other sources. The National Pandemic Implementation Plan should also be improved by including the following information in the next update: (a) resources and investments needed to complete the action items and where they should be targeted, (b) a process and schedule for monitoring and publicly reporting on progress made on completing the action items, (c) clearer linkages with other strategies and plans, and (d) clearer descriptions of relationships or priorities among action items and greater use of outcome-focused performance measures.

¹ GAO-09-909T: Influenza Pandemic, Gaps in Pandemic Planning and Preparedness Need to Be Addressed, July 29, 2009, www.gao.gov/news.items/d09909t.pdf

GAO-09-334: Influenza Pandemic, Sustaining Focus on the Nation's Planning and Preparedness Efforts, February 26, 2009, www.gao.gov/news.items/d09334.pdf

7. The Secretaries of Agriculture and Homeland Security should develop a memorandum of understanding that describes how USDA and DHS will work together in the event of a declared presidential emergency or major disaster, or an Incident of National Significance, and test the effectiveness of this coordination during exercises.
8. The Secretary of Agriculture should, in consultation with other federal agencies, states, and the poultry industry identify the capabilities necessary to respond to a probable scenario or scenarios for an outbreak of highly pathogenic avian influenza. The Secretary of Agriculture should also use this information to develop a response plan that identifies the critical tasks for responding to the selected outbreak scenario and, for each task, identifies the responsible entities, the location of resources needed, time frames, and completion status. Finally, the Secretary of Agriculture should test these capabilities in ongoing exercises to identify gaps and ways to overcome those gaps.
9. The Secretary of Agriculture should develop standard criteria for the components of state response plans for highly pathogenic avian influenza, enabling states to develop more complete plans and enabling USDA officials to more effectively review them.
10. The Secretary of Agriculture should focus additional work with states on how to overcome potential problems associated with unresolved issues, such as the difficulty in locating backyard birds and disposing of carcasses and materials.
11. The Secretary of Agriculture should determine the amount of antiviral medication USDA would need in order to protect animal health responders, given various highly pathogenic avian influenza scenarios. The Secretary of Agriculture should also determine how to obtain and provide supplies within 24 hours of an outbreak.